



Supplemental Application Data Sheet

Application Information

Application No.:: 10/777,455
Filing Date:: February 11, 2004
Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: Not Yet Assigned 1623
CD-ROM or CD-R?:: None
Sequence submission?:: None
Computer Readable Form (CRF)?:: No
Title:: LINCOMYCIN DERIVATIVES
POSSESSING ANTIBACTERIAL ACTIVITY
Attorney Docket Number:: 342312004920
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: None
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jason
Middle Name:: G.
Family Name:: LEWIS
City of Residence:: Hayward
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 2939 Kelly Street

City of mailing address:: Hayward

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94541

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Dinesh

Middle Name:: V.

Family Name:: PATEL

City of Residence:: Fremont

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 45109 Cougar Circle

City of mailing address:: Fremont

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Anandan

Middle Name:: S.

Family Name:: KUMAR

City of Residence:: Fremont

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 45109 Cougar Circle

City of mailing address:: Fremont

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mikhail
Middle Name:: F.
Family Name:: GORDEEV
City of Residence:: ~~South San Francisco~~- Castro Valley
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: ~~270 East Grand Avenue~~ 5072 Stone
Canyon Drive
City of mailing address:: ~~South San Francisco~~- Castro Valley
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94080- 94552

Correspondence Information

Correspondence Customer Number:: 25226

Representative Information

Representative Customer Number:: 25226

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/642,807	08/15/03
10/642,807	An application claiming the benefit under 35 USC 119(e)	60/403,770	08/15/02
<u>This Application</u>	<u>An application</u> <u>claiming the benefit</u> <u>under 35 USC</u> <u>119(e)</u>	<u>60/479,502</u>	<u>06/17/03</u>

Assignee Information

Assignee name:: VICURON PHARMACEUTICALS INC.
Street of mailing address:: 34790 Ardentech Ct.
City of mailing address:: Fremont
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94555